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maintenance fee notification	is.	D.OO. 1, 0) (L.	, op,g =		, (-,	100 100 100 101	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must			
000466 75	10/05/2005		have its own certificat	e of mailing or transmission.	ant or formal drawing, must		
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APPLICATION NO.	FILING DATE	FIRST NAMED INVE		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/018,993	05/17/2002	Albert Kohen			DIF 103907/US	2593	
TITLE OF INVENTION: M	ETHOD FOR TORQUE CO	ONTROL OF AN I	NDUCTION MOTO	R USING A VOLTAG	e controller		
APPLN. TYPE	SMALL ENTITY	ISSUE FI	RE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
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nonprovisional NO EXAMINER		\$1400 ART UN		\$0 LASS-SUBCLASS	\$1400 <b>7</b>	01/05/2006	
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SMITH, TYRONE W				318-727000			
Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1.							
Change of correspond	ence address (or Change of 22) attached.	Correspondence	or agents OR, alte		nt attorneys '		
			(2) the name of a single firm (having as a member a 2				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT (print	or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO?	data will appear on τ Γa substitute for filin	the patent. If an assign g an assignment.	nee is identified below, the d	ocument has been filed for	
(A) NAME OF ASSIGN	EE	(B	B) RESIDENCE: (CITY and STATE OR COUNTRY)				
lease check the appropriate	assignee category or catego	ries (will not be pri	inted on the patent):	🔲 Individual 🔲 C	orporation or other private gro	oup entity Government	
a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
				A check in the amount of the fee(s) is enclosed.			
	mall entity discount permitte	ed)	Payment by credit card. Form PTO-2038 is attached.				
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. Change in Entity Status (from status indicated above) . Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			(if necessary)				
			□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).				
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Authorized Signature Benoît Castel			Date January 3, 2006				
Typed or printed name Benoit CASTEL, #35,041				Registration	No. #35,041		
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